

ERIE COUNTY DEPARTMENT OF SOCIAL SERVICES

QUESTIONS & ANSWERS REGARDING RFP # 1510VF: INTENSIVE PREVENTIVE SERVICES

Questions submitted via e-mail and in person at the Bidder's Conference on April 28, 2015

QUESTION		ANSWER
1.	It was noted that on pages 2 and 3 of the RFP, the phrase "Independent Living Services" appears where it should say "Intensive Preventive Services."	That is an editing error. A correction will be posted on the County website as an addendum/correction to the RFP.
2.	How does one define "practitioner" as described in item 5 of the Program Characteristics section? Is there an educational or licensing requirement to "provide counseling, active treatment and intervention?"	A bachelor's degree is the accepted industry standard to provide Intensive Preventive services. A supervisor should have a bachelor's degree plus 2 years' experience. Core training is also valuable. All program staff must have a criminal background check, clearance through the State Central Registry and DMV.
3.	Regarding the 5 references required, can you describe who would provide a reference (individuals, agencies, foundations, etc.)?	References can be from community partners and collaborators, or an individual with knowledge of and experience with the services being offered. They should be program specific if possible. References generally should not be from ECDSS staff.
4.	Is there a requirement that one person provide all the services to the family?	No. There must be one case planner that oversees all services, but other staff may provide services if that is what is best for the family and the other staff are part of the IPS staffing pattern in the approved budget.
5.	If an organization has a Traditional Preventive Contract, can workers have mixed caseloads? For example, if a typical Traditional caseload is 12 families, can a worker have 6 Traditional families, and 1 Intensive Preventive family?	No- mixed caseloads are discouraged. There is an expertise that is unique to Intensive Preventive services, and Intensive Preventive families often require the full attention of the caseworker.
6.	We are used to the "Unit of Service" model. What is the pay structure with this service?	Intensive Preventive Services requires 5-6 days per week of face-to-face service. Billing is still by the service hour. A full-time caseworker is targeted to provide 1440 hours of service per year. Students and interns cannot provide billable service.
7.	Does the rate include transportation? It is not listed in the RFP.	Transportation is not mentioned specifically, but it is included.
8.	If a case planner goes out on medical leave, is it OK to have another employee take their place?	Yes.
9.	The RFP states that there must be "daily updates with the case manager, with documentation in CONNECTIONS." Is the daily requirement new?	"Daily" is meant to imply regular updates, with CONNECTIONS updated within 24 hours of service provision.
10.	On page 7, item "L," is it a new requirement that agencies are supposed to provide emergency assistance?	No- this was in the last RFP. This may entail linking clients to community services that can meet their emergency need.
11.	Are there any Flex Funds attached to Intensive Preventive Services?	No. However, if an agency has access to Flex Funds through a Traditional Preventive Services contract, they may use them for an Intensive Preventive family when all other resources have been considered.
12.	Is there such a thing as "Intermittent Intensive Preventive Services?"	No.

13.	What is the “average length of stay?”	Intensive Preventive Services should be a rapid turnaround; 30 days, with an additional 30 days if requested and necessary. Anything requiring more than that should be transitioned to Traditional Preventive, or removal of the child(ren).
14.	Any idea how many programs will be funded under this RFP?	Currently there are 4 agencies receiving funding for Intensive Preventive Services. We will have to see the proposals before we know how this RFP funding will be distributed.
15.	If someone has 15 years of experience in providing Intensive Preventive services, but does not have a bachelor’s degree, is that acceptable?	Traditionally, a bachelor’s degree is the minimally accepted credential for a case planner in Intensive Preventive services.